EXHIBIT B

SUPERIOR COURT OF NEW JERSEY
LAW DIVISION - ATLANTIC COUNTY
DOCKET NO. ATL-L-6966-10

LINDA GROSS and JEFFREY GROSS	:MASTER CASE	
Plaintiffs,	:NO.	
v.	:L-6341-10-CT	
	:	
GYNECARE, ETHICON, INC., JOHNSON & JOHNSON, and JOHN DOES 1-20	:Civil Action :Case No. 291	
Defendants.	:	

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Tuesday, December 4, 2012

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Transcript of the videotaped deposition of ELIZABETH KAVALER, M.D., called for examination in the above-captioned matter, said deposition taken pursuant to Superior Court Rules of Practice and Procedure by and before Kimberly A. Overwise, a Certified Realtime Reporter, Registered Professional Reporter, Certified Court Reporter, and Notary Public, at Riker Danzig Scherer Hyland Perretti, LLP, 500 Fifth Avenue, New York, New York, on the above date, beginning at 9:41 a.m.

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relying on any specific standards for, you know, what constitutes an adequate warning or not?

MS. KABBASH: Objection.

THE WITNESS: Do we have the IFU? Can we look at it or --

BY MR. SLATER:

Q I'm asking -- I'm not asking about any specifics within it.

A Right. Okay.

Q I'm asking when you formed your opinions and said that the warnings were adequate in the IFU, were you relying on any particular standards to give that opinion?

MS. KABBASH: Objection.

THE WITNESS: For me -- I was saying for me, for my experience as a pelvic surgeon, they were adequate for me, and I'm a --

BY MR. SLATER:

Q Based on your own -- I'm sorry.

A -- I'm a regular pelvic -- you know, I'm just -- I'm another -- I'm a standard pelvic surgeon.

Q So your opinions with regard to the adequacy of the warnings in the IFU for the Prolift® were based on your own personal experience, your

personal standards; correct?

A Right.

Q And am I correct that you don't have any information as you sit here now as to what, for example, Ethicon medical affairs thought was a standard or was a criteria for whether or not a warning would need to be included in the IFU? I'm correct; right?

A Right.

Q And you as you sit here now have no idea as to what standards the people within regulatory affairs at Ethicon thought applied, what criteria applied, to whether or not warnings had to be provided or how they had to be provided in the IFU; correct?

MS. KABBASH: Objection.

THE WITNESS: Right. You mean the medical affairs people and the regulatory people? Is that what you're asking? Yeah, I don't know what their -- why they did -- I don't know what their opinion is, no.

BY MR. SLATER:

Q You don't know what standards Ethicon internally was applying in deciding what to warn about and how to warn about those things in the IFU;

correct?

A Right.

Q And the same would hold true with regard to the patient brochure; correct?

A Right.

Q The POP-Q is a system used for a physician or whoever's doing the measurements to actually objectively measure the degree of prolapse a woman has; correct?

A Yeah. It's sort of a communication system. It's not completely objective, but it's -- that's the goal, yes.

Q And let me ask a little more on that. The POP-Q measurement system provides a grading system that people can refer to to understand what is being communicated about the degree of prolapse a woman has; correct?

A Yes, that's right.

Q In actually performing a POP-Q measurement, there's a subjective element depending on the judgment of the person doing the measurements, for example; correct?

A Right.

Q Also depending on what the woman is doing when the measurements are being taken; correct?

use the Baden-Walker system?

A Yes.

Q Do you use the Baden-Walker Halfway system?

A I don't know what that is. I use the Baden-Walker system.

Q I've seen references to a Halfway system that's somewhat of a modification and shorthand. That's not something you're familiar with?

A No.

Q You're not familiar with the term "Baden-Walker Halfway system"?

A No.

Q Am I correct that you have no understanding as to what Ethicon internally had as a design intent with regard to the Prolift®, meaning their technical intent for what they expected and wanted the Prolift® to do? You don't know internally what Ethicon's thoughts on that were; correct?

MS. KABBASH: Objection.

THE WITNESS: I don't know what their discussions were. I just know the product that they produced.

had been doing Prolift®, I was using mesh. A lot of this information -- my issue was safety in using trocars and being able to implant it. A lot of this data is their experience, which is important to me as a clinician, but I have my own experience.

BY MR. SLATER:

Q Am I understanding correctly that in terms of your evaluation of -- well, rephrase.

Am I correct that in terms of your looking at literature, listening to other people's experiences, whatever it is, you listen to that, but from your perspective what really matters to you and what you focus on as being significant is your own personal experience with your own patients?

A That's -- it's all part and parcel, but at some point I have a body of my own experience which I can then gauge against the literature. So that's correct.

Q And in terms of your opinions in this case, you're basing those on your own personal experience as opposed to what may be in the literature and what may be other people's experiences; correct?

A Right.

MS. KABBASH: Objection.